

## Electronic Patent Application Fee Transmittal

| <b>Application Number:</b>                              | 10535597                        |          |        |                      |
|---|---------------------------------|----------|--------|----------------------|
| <b>Filing Date:</b>                                     | 11-Apr-2006                     |          |        |                      |
| <b>Title of Invention:</b>                              | Inhalation method and apparatus |          |        |                      |
| <b>First Named Inventor/Applicant Name:</b>             | Jonathan S. H. Denyer           |          |        |                      |
| <b>Filer:</b>   | Michael W. Haas/Noemi Chapa     |          |        |                      |
| <b>Attorney Docket Number:</b>                          | 011217US1                       |          |        |                      |
| Filed as Large Entity                                   |                                 |          |        |                      |
| <b>U.S. National Stage under 35 USC 371 Filing Fees</b> |                                 |          |        |                      |
| Description   | Fee Code                        | Quantity | Amount | Sub-Total in USD(\$) |
| <b>Basic Filing:</b>                                    |                                 |          |        |                      |
| <b>Pages:</b>   |                                 |          |        |                      |
| <b>Claims:</b>  |                                 |          |        |                      |
| <b>Miscellaneous-Filing:</b>                            |                                 |          |        |                      |
| <b>Petition:</b>  |                                 |          |        |                      |
| <b>Patent-Appeals-and-Interference:</b>                 |                                 |          |        |                      |
| Notice of appeal  | 1401                            | 1        | 540    | 540                  |
| <b>Post-Allowance-and-Post-Issuance:</b>                |                                 |          |        |                      |
| <b>Extension-of-Time:</b>                               |                                 |          |        |                      |

| Description       | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|-------------------|----------|----------|--------|----------------------|
| Miscellaneous:    |          |          |        |                      |
| Total in USD (\$) |          |          |        | 540                  |